STATE OF MONTANA

CANCELLATION of DOMESTIC LIMITED PARTNERSHIP

MAIL: BRAD JOHNSON

Secretary of State P.O. Box 202801 Helena, MT 59620-2801

PHONE: (406)444-3665 **FAX:** (406)444-3976 **WEB SITE:** sos.mt.gov



Prepare, sign, submit with an original signature and filing fee.

This is the minimum information required.

(This space for use by the Secretary of State only)

Filing Fee: \$15.00

☐ Priority Filing Add \$20.00

Revised: 10/01/2003

1.	The name of this Limited Partnership is:	
2. 3.	The date of filing of the certificate of limited partnership is: (Mo/Day/Year) The reason for filing the certificate of cancellation:	
4.	The effective date of cancellation if it is not to be effective upon the filing of the certificate:	(Mo/Day/Year)
	Signature of all general partners	
	Date	

- All information provided, including names and addresses of officers and directors, will be made available on the Secretary of State's web site or upon request.
- There are important legal and accounting implications with respect to this corporation action. Suitable legal and accounting advice should be secured before submission. The Secretary of State's office encourages that such advice be sought prior to filling out forms to be sure that you understand the terms and procedures.
- Please be advised that the Business Services Bureau of the Montana Secretary of State will process your business documents within 10 working days of initial receipt. During this period if it's determined that your document doesn't meet statutory requirements, a letter outlining the deficiencies will be returned to the original submitter. If the document is complete and correct, the document will be filed and an acknowledgment copy showing completion returned to the original submitter

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HELP SHEET

This form is to be used for canceling the Certificate of Limited Partnership.

You may request priority filing of your document. Simply mark the "priority filing" box and include an additional \$20.00 with your filing fee. Priority filing ensures that your application will be handled within 24 hours of receipt of the document by our office.

Please type or clearly print the requested information.

Upon completion, mail this form with an ORIGINAL SIGNATURE, and the correct filing fee to the Secretary of State, PO Box 202801, Helena, MT 59620-2801.

The Secretary of State will send a letter of acknowledgment to you once your document has been filed with our office.

If you have any questions regarding this form, please contact the Secretary of State, Business Services Bureau at (406) 444-3665.

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